



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
BERGE et al.)
Application Number: 10/563,273)
Filed: July 24, 2006)
For: USE OF A SINGLE CELL PROTEIN MATERIAL)
ATTORNEY DOCKET No. ACAP.0013)

**Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

COVER LETTER

Sir:

The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	35	38	18 (Over 20)	x \$52	0
Independent Claims	3	3	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
			TOTAL		0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

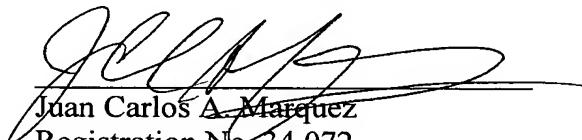
<input checked="" type="checkbox"/> Response to the Office Action (with Claim Amendments)	<input checked="" type="checkbox"/> Petition for Extension of Time (3 months)
<input type="checkbox"/> Substitute Specification	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Assignment	<input type="checkbox"/> Statements & Pre-exam search report with References
<input type="checkbox"/> Letter to Draftsperson	<input type="checkbox"/> Request for Continued Examination

Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.

A check in the amount of **\$555.00** to cover the 3-month Extension of Time fee for small entity is enclosed.

The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,



Juan Carlos A. Marquez
Registration No. 34,072

REED SMITH LLP
3110 Fairview Park Drive
Suite 1400
Falls Church, Virginia 22042
(703) 641-4200
March 24, 2009



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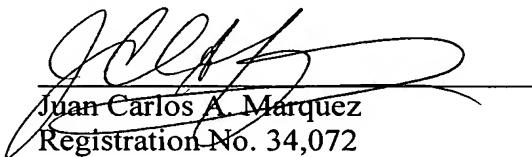
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